



CONTRA COSTA COUNTY
Department of Conservation & Development
Community Development Division

DEVELOPMENT PLAN APPLICATION				
TO BE COMPLETED BY OWNER OR APPLICANT				
OWNER		APPLICANT		
Name		Name		
Address		Address		
City, State/Zip		City, State/Zip		
Phone email		Phone email		
By signing below, owner agrees to pay all costs, including any accrued interest, if the applicant does not pay costs. <input type="checkbox"/> Check here if billings are to be sent to applicant rather than owner. Owner's Signature _____		By signing below, applicant agrees to pay all costs for processing this application plus any accrued interest if the costs are not paid within 30 days of invoicing. Applicant's Signature _____		
CONTACT PERSON (optional)		PROJECT DATA		
Name		Total Parcel Size:		
Address		Proposed Number of Units:		
City, State/Zip		Proposed Square Footage:		
Phone email		Estimated Project Value:		
Project description (attach supplemental statement if necessary):				
<div style="display: flex; justify-content: space-between;"> ↓ FOR OFFICE USE ONLY ↓ </div>				
Project description:				
Property description:				
Ordinance Ref.:	TYPE OF FEE	FEE	CODE	Assessor's #:
Area:	*Base Fee/Deposit	\$	S-	Site Address:
Fire District:	Late Filing Penalty (+50% of above if applicable)		S-066	Zoning District:
Sphere of Influence:	#Units ____ x \$195.00		S-014	Census Tract:
Flood Zone:	____ Sq. Ft. x \$0.20			Atlas Page:
Panel Number:	Notification Fee	15.00 / 30.00	S-052	General Plan:
x-ref Files:	Fish & Game Posting (if not CEQA exempt)	75.00	S-048	Substandard Lot: YES <input type="checkbox"/> NO <input type="checkbox"/>
	Environmental Health Dept.	47.00	5884	Supervisory District:
	Other:			Received by:
Concurrent Files:	TOTAL	\$		Date Filed:
	Receipt	#		File #DP
*Additional fees based on time and materials will be charged if staff costs exceed base fee.				

INSTRUCTIONS ON REVERSE